## EXPRESS IL NO. EK673491077US



Docket No. 00-5016

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

| As a below named inventor, I h  | ereby declare that:  |  |   |
|---|--|--|---|
| My residence, post office addre   | ess and citizenship are a  | s stated below next to my name,  |   |
| I believe I am the original, first patent is sought on the invention  |  | e subject matter which is claimed a  | nd for which a                                  |
| -   |  | GRAPHICAL REPRESENTATION SYSTEMS SYSTE |   |
| the specification of which [X as Appln. Serial No. I hereby state that I have review including the claims, as amend                     | wed and understand the   | And was amended on contents of the above identified spe  | cification,                                     |
| I acknowledge the duty to disc<br>in accordance with Title 37, C  |  | is material to the patentability of thions, Section 1.56(a).   | is application                                  |
| application(s) for patent or inv  | entor's certificate listed   | United States Code, Section 119 of below and have also identified any filing date before that of the applications.   | foreign   |
| Prior Foreign Application(s)  |  |  | riority Claimed                                 |
| (Number)  | (Country)  | (Day/Month/Year filed)   | _] Yes [_] No                                   |
| I hereby claim the benefit und applications(s) listed below.  | er Title 35, United State  | s Code, 119(e) of any United States  | s provisional                                   |
| 60,   | /219,194   | Julv 19, 2000_   |   |
| (Applicat   | ion Number)  | (Filing Date)  | <del></del>                                     |
| application(s) listed below and<br>not disclosed in the prior Unit<br>35, United States Code, Section<br>in Title 37, Code of Federal R | d insofar as the subject in<br>ted States application in<br>on 112, I acknowledge the<br>degulations, Section 1.56 | es Code, Section 120 of any United matter of each of the claims of this a the manner provided by the first pathe duty to disclose material informations which occurred between the filing all filing date for this application:  | application is ragraph of Title tion as defined |
| (Appln. Serial No.)   | (Filing Date)  | (Status—patented, pending, a   | abandoned)                                      |



## Docket No. <u>00-5016</u>

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Leonard C. Suchyta, Reg. No. 25,707 and James K. Weixel Reg. No. 44,399

| Address all telephone calls to  | ames K. Weixel   | _ At teleph   | one no.                | (781) 466-2220                             |  |  |
|---|--|---|------------------------|--|--|--|
| Address all correspondence to   | Leonard C. Suchyta Verizon Services Grou 600 Hidden Ridge, HO Irving, TX 75038         |   |                        |  |  |  |
| I hereby declare that all statements made on information and belief are the knowledge that willful false state or both, under Section 1001 of Titl may jeopardize the validity of the a | believed to be true; and for<br>tements and the like so made 18 of the United States ( | urther that thes<br>ade are punish<br>Code and that s | se statem<br>able by f | nents were made with fine or imprisonment, |  |  |
| FULL NAME OF INVENTOR   | Ashok Kum  | ar  |                        |  |  |  |
| Inventor's signature  |  | Date 0/   | 24/6                   | 7 /  |  |  |
| Residence Tampa, Florid   | a  | Citizenship   | <u>India -</u>         | - H1-B visa                                |  |  |
| Post Office Address 14535 Bruce B Downs Boulevard #1625 Tampa, FL 33613   |  |   |                        |  |  |  |
| FULL NAME OF INVENTOR   | Girish Nair  | · .   |                        |  |  |  |
| Inventor's signature  | <del></del>  | Date  | 1/24,                  | 12001                                      |  |  |
| Residence Tampa, Florid   | la   | Citizenship   | India -                | - H1-B visa                                |  |  |
| Post Office Address 14240 North 42 <sup>nd</sup> Street #502 Tampa, FL 33613  |  |   |                        |  |  |  |